



## ASC Utilization Report

State Form 49933 (R3/6-05)

Indiana State Department of Health

Acute Care

### I. Center Identification

Organization Name: NOVAMED PAIN MANAGEMENT OF NEW ALBANY, LLC

Street Address: 520 West First St.

City: New Albany

County: Floyd

ASC Web Address:

Fiscal Year: 2012

Accredited: ☐ Yes ☒ No

Name of Accrediting Body:

Deemed Status: ☐ Yes ☒ No

Corporate Tax Status: ☒ For Profit ☐ Non Profit

### II. Identification of Surgical Resources

Number of operating rooms	0
Number of procedure rooms	1

### III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	1225	1474
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
62311	657	
62310	277	
64493	170	
64494	147	
64483	115	
27096	32	
G0260	25	

64520	20
64479	17
64490	14

#### **IV. Outcomes from Surgical Procedures**

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	0
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